FORM 1310-19
(MAY 2003)

UNITED STATES DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT
REIMBURSABLE QUARTERS FOR TENANTS ON DESIGNATED TRAVEL STATUS

STANDARD VOUCHER (SV) CODING DOCUMENT

DOCUMENT ID INFORMATION

TRANSACTION CODE: **S V**   DIVISION: **AK**   ID NUMBER: _____

HEADER INFORMATION

SV DATE: **10 12 2004**   ACCOUNTING PERIOD:_____
ACTION: __ EXPENSE(E), REVENUE (R), GL(G), BUDGET (B):_____
BUDGET FYS: _____   TRANS TYPE:_____
REVERSAL PERIOD: _____
REF TRANS ID: _____
DOCUMENT TOTAL:$ **500.00**   (TOTAL AMOUNT FOR LINES 1 AND 2)

DESCRIPTION: REIMBURSE QUARTERS FOR TENANTS ON DESIGNATED TRAVEL STATUS

LINE INFORMATION

LINE NUMBER: **001**   TRAN TYPE: GO   EXP/GL: E
BFYS: _____   FUND:_____   DIVISION: **AK**
BUDGET ORG: **AK-050**   PROG: **1234AB**
BOC/REV SOURCE: 258A_   JOB: **AB3C**
VENDOR CODE: 14110008   1   NAME:_____
QUANT:_____

REF TRAN ID:_____   REF LINE:_____
AGREEMENT #: **AK-BOO-01-000**   ADVANCE:___
AMOUNT: $ **250.00**   I/D IND: I_
DESCRIPTION:REIMBURSE QUARTERS FOR (**JON DOE**)(**10/01/04-10/10/04**)

LINE NUMBER: **002**   TRAN TYPE: RV   EXP/GL: G
BFYS: _____   FUND:_____   DIVISION: **AK**
BUDGET ORG: **AK-950**   PROG:9710RD
BOC: _____   JOB: 1000
VENDOR CODE: PC(**AK**)000   1   NAME:_____
QUANT:_____

REF TRAN ID:_____   REF LINE:____
AGREEMENT #:(**AK**)97101000_____   ADVANCE: A_
AMOUNT: $ **250.00**   I/D IND: I_
DESCRIPTION:REIMBURSE QUARTERS FOR TENANTS ON DESIGNATED TRAVEL STATUS____

PREPARATION, APPROVAL, AND INPUT INFORMATION

PREPARED BY: *WORKER BEE*   TELEPHONE NUMBER:800-123-4567__DATE: 10/13/04
APPROVED BY:_____   TELEPHONE NUMBER:_____DATE:_____
APPROVED BY NBC (prior BFY or over $20,000):_____DATE:_____
INPUT BY:_____DATE:_____

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STANDARD VOUCHER (SV) CODING DOCUMENT

This EXAMPLE is to help you with specific line(s) that might be confusing.

DOCUMENT ID INFORMATION
TRANSACTION CODE: **S V**   DIVISION: **1**   ID NUMBER:_____ _

HEADER INFORMATION

SV DATE:_____   ACCOUNTING
PERIOD:_____
ACTION: __EXPENSE(E), REVENUE (R), GL(G), BUDGET (B):_____
BUDGET FYS: _____   TRANS
TYPE:_____
REVERSAL PERIOD: _____
REF TRANS ID: _____
DOCUMENT TOTAL:$_____ (TOTAL AMOUNT FOR LINES 1 AND 2)

DESCRIPTION: REIMBURSE QUARTERS FOR TENANTS ON DESIGNATED TRAVEL STATUS

1 – Your State's Abbreviation
2 – Your State's Budget Org. Code
3 – Your State's Abbreviation
4 – All program codes must have the following format: ####LL, #=number L=letter
5 – Provide Job Code, if required.
6 – Tenant's Name
7 – The Dates Reimbursing (for example: 01/01/04 to 06/24/04)
8 – Two Letter State Abbreviation
9 – Two Letter State Abbreviation (same as 1 and 3)
10 – Two Letter State Abbreviation.
11 – Print your name and initial, include the telephone number and date.

LINE INFORMATION

LINE NUMBER: **001**   TRAN TYPE: GO   EXP/GL: E
BFYS: _____   FUND:_____ DIVISION:__**3**___
BUDGET ORG: **2**   PROG:__**4**___
BOC/REV SOURCE: 258A_   JOB:____**5**___
VENDOR CODE: 14110008   1
NAME:_____

QUANT:_____
REF TRAN ID:_____ REF LINE:___
AGREEMENT #:_____ ADVANCE:___
AMOUNT: $_____   I/D IND: I_
DESCRIPTION:REIMBURSE QUARTERS FOR (**6**   )(**7**   )

LINE NUMBER: **002**   TRAN TYPE: RV   EXP/GL: G
BFYS: _____   FUND:_____   DIVISION:__**9**__
BUDGET ORG:_____   PROG:9710RD
BOC:_____   JOB: 1000
VENDOR CODE: PC(**8**)000   1
NAME:_____

QUANT:_____
REF TRAN ID:_____ REF LINE:___
AGREEMENT #:(__**10**__)97101000_____ ADVANCE: A_
AMOUNT: $_____   I/D IND: I_
DESCRIPTION:REIMBURSE QUARTERS FOR TENANTS ON DESIGNATED TRAVEL STATUS_____

PREPARATION, APPROVAL, AND INPUT INFORMATION

PREPARED BY: **11**   TELEPHONE NUMBER:_____ DATE:_____
APPROVED BY:_____ TELEPHONE NUMBER:_____ DATE:_____
APPROVED BY NBC (prior BFY or over $20,000):_____DATE:_____
INPUT BY:_____DATE:_____

Attachment 2-2